



# QUEENSBURY COMMUNITY SCHOLARSHIP ASSOCIATION, INC (QCSA) 2023 Scholarship Application

The mission of this Queensbury based scholarship program is to award as many scholarships as possible to graduates who are seeking to continue their education. These scholarships will be awarded on the basis of several criteria, including but not limited to: community spirit, school activities, financial need and academic achievement.

**Important Information:** Applicants are responsible for seeing that all information requested herein is submitted and accurate. **The Awards Committee will not process applications found to be incomplete or submitted after the deadline.**

**Application Deadline:** Applications are due by **3:30 p.m. on THURSDAY, April 6, 2023** at the Queensbury High School Counseling Center. Please submit your completed application in **one** of the following methods: 1) In-Person to Mrs. Nelson in the Counseling Center; or, 2) Scan/Email to Mrs. Nelson, Secretary ([knelson@queensburyschool.org](mailto:knelson@queensburyschool.org)).

**Applicant:** \_\_\_\_\_  
Name (last) (first) (middle initial)

**Permanent Address:** \_\_\_\_\_  
(street) (city) (state) (zip)

\_\_\_\_\_  
Date of Birth (month/day/year) (\_\_\_\_) Telephone

\_\_\_\_\_  
Name of parent(s)/ guardian(s)

**Post-Secondary School Plans:** Please list the name and location of the college, university or other educational institution **you plan to attend**. If yet to be determined, please list your top three choices in order of preference. You will need to advise the Counseling Center, and in *Naviance*, of your final decision as soon as it is determined.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Special Scholarship Consideration: (REQUIRED: Please check all that apply)**

Do you plan on attending **SUNY Adirondack** this fall: \_\_\_\_ Yes \_\_\_\_ No

Do you plan on studying a **STEM-related** degree program this fall: \_\_\_\_ Yes \_\_\_\_ No

I plan to enroll in a **College/University**: \_\_\_\_ Less than half-time \_\_\_\_ Half-time or more \_\_\_\_ Full-time

I plan to enroll in a **Trade/Technical School**: \_\_\_\_ Less than half-time \_\_\_\_ Half-time or more \_\_\_\_ Full-time

Are you eligible for free/reduced lunch at QHS: \_\_\_\_ Yes \_\_\_\_ No \_\_\_\_ Unsure

What is the major field of study you plan to pursue? If undecided, please list the top three areas of interest you plan to explore.

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In the space below or as a separate attachment, please share with us your intended major of study and why you are pursuing this field. If you are undecided, please explain areas of interest to you and how those interests may play a role in your future endeavors.

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**Personal Reflection:** In the space below, or as a separate attachment, please highlight no more than three of the most valuable activities that you have been involved with while being a Queensbury High School student. Activities may include experiences such as employment, community service, school/community clubs, athletics or an academic program that held particular significance throughout your time at QHS.

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It is highly recommended that you attach your updated Resumé. Please include an updated copy with your application.

Have you ever volunteered for the QCSA Phone-A-Thon/Mail-A-Thon? Yes\_\_\_ No \_\_\_  
(If you answered Yes, what grade(s) were you a volunteer? Please check Grade(s): 9\_\_ 10\_\_ 11\_\_ 12\_\_)

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*\*In submitting this application, I certify that the information provided herein is complete and accurate to the best of my knowledge. Falsification of information may result in termination of any scholarship granted.*

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Date

# PHOTO OPT OUT

## ONLY COMPLETE THIS SECTION IF YOU DO NOT WANT YOUR PHOTO/IMAGE TO BE USED IN QCSA PUBLICATIONS:

The QCSA often showcases Queensbury student photographs for use in various **Queensbury Community Scholarship Association (QCSA)** publications, social media, public affairs announcements, scholarship materials, or the QCSA Website. However, we recognize that some may object to the use of their photo. If you do not want your photo used or publicized by the QCSA, please sign below. The absence of a signature, in essence, grants the QCSA organization permission to use student photographs for the sole purposes as described above.

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Date Signed

\_\_\_\_\_  
Signature of Parent or Guardian (If student is under 18 years of age)

\_\_\_\_\_  
Date Signed

### **\*To be completed by the School Counselor\***

To the best of your knowledge does the information provided in this application appear to be accurate?

Yes: \_\_\_\_\_ No: \_\_\_\_\_ Not Sure: \_\_\_\_\_

Please make the Awards Committee aware of any additional information or special circumstances regarding this student:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Attachments:** Transcript, Resumé, and Counselor Letter (if applicable).

School Counselor Signature: \_\_\_\_\_

Date: \_\_\_\_\_

**\*\*\*\*Deadline: Thursday April 6, 2023 at 3:30 p.m.\*\*\*\***

Please submit your completed application in one of two ways: 1) In-Person; 2) Scan/Email to Mrs. Nelson, Secretary.  
([knelson@queensburyschool.org](mailto:knelson@queensburyschool.org))